

Behavioral Health Reform in Community Based Services

Mental Health Board members must look at least restrictive levels of care, which meet the behavioral health needs of the person. New and expanded community based services are being developed as a part of behavioral health reform to better meet the needs of persons who are mentally ill *and* dangerous.

Outpatient commitments should be considered in most cases, as they are less restrictive and less traumatic to the person. Outpatient services include **residential services**. Outpatient Commitments may be made to the following community based services in Mental Health:

Psychiatric Residential Rehabilitation, Day Treatment, Community Support, Day Rehabilitation, Outpatient Therapy, and Medication Management. Commitment *may be made to more than one service, if needed, such as community support and medication management.*

Outpatient Commitments may be made to the following community based services in Substance Dependency:

Short Term Residential, Therapeutic Community, Halfway House, Partial Care, Intensive Outpatient, Community Support, and Outpatient Therapy. Commitment *may be made to more than one service, if needed, such as community support and outpatient therapy.*

The Mental Health Board may commit the person to Outpatient – directly to a provider of one of the above-mentioned services or, under

the new legislation, to HHS for Inpatient (Acute or SubAcute) which will be provided through the Behavioral Health Regions by contracts with providers of Acute/SubAcute care. The Crisis Center would contact Providers of Inpatient (Acute and SubAcute care) and these services would be pre-authorized through Magellan Behavioral Health, the contracted provider of (ASO) Administrative Services Only. A list of providers of Acute and SubAcute care is available from the Division of Behavioral Health, P.O. Box 98925, Lincoln, NE 68509-8925.

As a result of the passage of LB1083, Mental Health Boards are to commit mentally ill and dangerous persons to Nebraska Health and Human Services for inpatient (Acute and SubAcute) care. HHS, through the community hospitals, and the state six behavioral health regions and the state hospital, will provide the level of care necessary as determined by the mental health board upon reviewing the Professional Affidavit, testimony, and other pertinent information presented at the Mental Health Board hearing. A list of providers of mental health and substance abuse services in each region is available at the following address:

Division of Behavioral Health Services
P.O. Box 98925
Lincoln, NE 68509-8925.

As a part of LB1083, changes were made in training requirements for Mental Health Board Members. Under the new legislation, Mental Health Board Members must be trained **prior to serving on the Board**. Another change is that members must satisfactorily complete

Mental Health Board Training at least once every four years.